Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 10 0 A 29 89 Substitute for Form PTO-875 APPLICATION AS FILED PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$ RATE (\$) FEE (\$ BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS minus 20 = OR (37 CFR 1.16(i)) INDEPENDENT CLAIMS minus 3 = (37 CFR 1.16(h)) x x If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) \* If the difference in column 1 is less than zero, enter ID In column 2. TOTAL **TOTAL** APPLICATION AS AMENDED PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (\$) RATE (\$) ADDI-ADDI-AFTER **PREVIOUSLY EXTRA** TIONAL TION ENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1.15(i)) Minus ENDM OR Independent (37 CFR 1.16(h)) Minus 0 00 = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) D OR TOTAL 0 OR ADDIL FEE ADDIL FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT RATE (\$) REMAINING ADDI-RATE (\$) ADDI- $\alpha$ **FXTRA** AFTER **PREVIOUSLY** TIONAL TIONAL ENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1.16(i)) Minus ENDM OR Minus OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL OR ADDIL FEE ADD#L FEE If the entry in column 1 is less than the entry in column 2, write Din column 3. \*\* If the thighest Number Previously Paid For IN THIS SPACE is less than 20, enter [20]

The tHighest Number Previously Paid Fort∷(Total or Independent) is the highest number found in the appropriate box in column 1 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

\*\*\* If the Highest Number Previously Paid For N THIS SPACE is less than 3, enter 30